

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	62607	9/11/99
O.L.P.E. CLASSIFIER		48	9/3/99
FORMALITY REVIEW		69300	

INDEX OF CLAIMS

✓ ..... Rejected  
 - ..... Allowed  
 + (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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